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** CONTINUING DATA *****
None

** FOREIGN APPLICATIONS *****
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Shm

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Shm</i> 10-23-06 Examiner's Signature Initials	STATE OR COUNTRY GERMANY	SHEETS DRAWING 7	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 1
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TITLE

Supporting device for a portable device

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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